

Please read instructions on reverse be completing form.

	United States	<input checked="" type="checkbox"/> Registration <input type="checkbox"/> Amendment <input type="checkbox"/> Other	OPP Identifier Number
	Environmental Protection Agency		
	Washington, DC 20460		

### Application for Pesticide - Section I

1. Company/Product Number 100-xxxx	2. EPA Product Manager Ms. Linda Hollis	3. Proposed Classification <input type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) Appear™	PM# BPPD	
5. Name and Address of Applicant (Include ZIP Code) Syngenta Crop Protection, LLC P. O. Box 18300 Greensboro, NC 27419  <input type="checkbox"/> Check if this is a new address		6. Expedited Review. In accordance with FIFRA Section 3(c)(3) (b)(i), my product is similar or identical in composition and labeling to:  EPA Reg. No. <span style="background-color: black; color: black;">XXXXXXXXXX</span> Product Name <span style="background-color: black; color: black;">XXXXXXXXXXXXXXXXXXXX</span>

### Section - II

<input type="checkbox"/> Amendment - Explain below.	<input type="checkbox"/> Final printed labels in response to Agency letter dated _____
<input type="checkbox"/> Resubmission in response to Agency letter dated _____	<input type="checkbox"/> "Me Too" Application.
<input type="checkbox"/> Notification - Explain below.	<input checked="" type="checkbox"/> Other - Explain below.

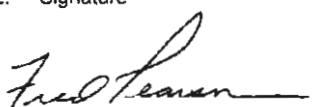
**Explanation:** Use additional page(s) if necessary. (For Section I and Section II.).

Application for New Product, 100% Repack of registered End-Use Product, no data or data matrix required. PRIA B660. Letter of Authorization from data owner.

### Section - III

1. Material This Product Will Be Packaged In:				2. Type of Container
Child-Resistant Packaging <input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No	Unit Packaging <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Water Soluble Packaging <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Metal <input checked="" type="checkbox"/> Plastic <input type="checkbox"/> Glass <input type="checkbox"/> Paper <input type="checkbox"/> Other (Specify) _____
*Certification must be submitted		If "Yes" No. per Unit Packaging wgt. Container	If "Yes" No. per Unit Packaging wgt. container	
3. Location of Net Contents Information  <input checked="" type="checkbox"/> Label <input type="checkbox"/> Container	4. Size(s) Retail Container Various: 1 gallon through 30 gallons, 55 gallons, 250 gallons, and BULK	5. Location of Label Directions <input checked="" type="checkbox"/> On Label <input type="checkbox"/> On Labeling accompanying product		
6. Manner in Which Label is Affixed to Product  <input type="checkbox"/> Lithograph <input type="checkbox"/> Paper glued <input type="checkbox"/> Stenciled		<input checked="" type="checkbox"/> Other <u>Pressure Sensitive</u>		

### Section - IV

1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)			
Name Fred Pearson	Title Regulatory Team Leader	Telephone No. (Include Area Code) 336-632-2365	
Certification I certify that the statements I have made on this form and all attachments thereto are true, accurate and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.			6. Date Application Received (Stamped)
2. Signature 	3. Title Regulatory Team Leader Lawn, Garden and SeedCare Products Syngenta Crop Protection, LLC		
4. Typed Name Fred Pearson	5. Date March 15, 2012		

EPA Form 8570-1 (Rev. 8-94) Previous editions are obsolete.

\*Product ingredient source information may be entitled to confidential treatment\*



Ms. Linda A. Hollis  
3-15-2012 - Application for New Product Appear™  
Page 2 of 2

To assist in the review of this application, we are providing a copy your approval of the [REDACTED] alternate brand name [REDACTED] dated May 9, 2012. We are also providing a version of the [REDACTED] label with the edits we are making to Syngenta-ize the label as described above.

The formal components of this submission are:

- This cover letter.
- PRIA Prepayment Receipt.
- Application for New Product Registration (EPA Form 8570-1).
- A Formulator's Exemption Statement indicating Syngenta's 100% repack of EPA Reg. No. [REDACTED]
- A Letter of Authorization from [REDACTED] supporting Syngenta's PRIA B660 application for a 100% repack of [REDACTED]
- Two (2) copies of the proposed Syngenta Confidential Statements of Formula
  - Basic CSF 1367-1, dated 3-1-2012.
- Five (5) copies of the proposed label.
- One (1) CD with an Adobe pdf of the proposed label.
- One (1) Certification with Respect to Label Integrity Form.

There is no data or data matrix required for the B660 application.

#### Fees for Services

In compliance with the Pesticide Registration Improvement Act, Syngenta Crop Protection has paid the pesticide registration fee for this action, a PRIA II B660 action with a 3-month timeline and a fee of \$1,159 is enclosed. Kindly email the registration fee confirmation to my regulatory assistant Pat Eay at [pat.eay@syngenta.com](mailto:pat.eay@syngenta.com).

We trust that you will find this application in order; however, should there be any questions, please contact me at 336.632.2365 or via e-mail at [fred.pearson@syngenta.com](mailto:fred.pearson@syngenta.com).

Sincerely,

Fred J. Pearson  
Regulatory Team Leader – Professional Products: Lawn, Garden & Seed Care  
Syngenta Crop Protection, LLC

Enclosures

\*Product ingredient source information may be entitled to confidential treatment\*



United States  
**Environmental Protection Agency**  
 Washington, DC 20460  
**Formulator's Exemption Statement**  
 (40 CFR 152.85)

Applicant's Name and Address  Syngenta Crop Protection, LLC P.O. Box 18300 Greensboro, NC 27419-8300	EPA File Symbol/Registration Number 100-
	Product Name Appear™
	Date of Confidential Statement of Formula (EPA Form 8570-4) 03/01/2012

As an authorized representative of the applicant for registration of the product identified above, I certify that:

(1) This product contains the following active ingredient(s):

potassium phosphite

(2) Of these, each active ingredient listed in paragraph (4) is present solely as the result of the use of that active ingredient in the manufacturing, formulation or repackaging another product which contains that active ingredient which is registered under FIFRA Section 3, is purchased by us from another person and meets the requirements of 40 CFR section 158.50(e)(2) or (3).

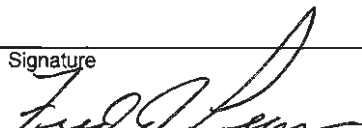
(3) Indicate by checking (A) or (B) below which paragraph applies:

☒ (A) An accurate Confidential Statement of Formula (EPA FORM 8570-4) for the above identified product is attached to this statement. That formula statement indicates, by company name, registration number, and product name, the source of the active ingredient(s) listed in paragraph (1).

OR

☐ (B) The Confidential Statement of Formula (CSF)(EPA Form 8570-4) referenced above and on file with the EPA is complete, current, an accurate and contains the information required on the current CSF.

(4) The following active ingredients in this product qualify for the formulator's exemption.

Source		
Active Ingredient	Product Name	Registration Number
potassium phosphite	<div style="background-color: black; width: 100px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 250px; height: 15px;"></div>	<div style="background-color: black; width: 80px; height: 15px; margin-bottom: 5px;"></div>
Signature 	Name and Title Fred J. Pearson, Team Leader	Date March 15 2012

EPA Form 8570-27 (Rev. 06-2004)

Copy 1 - EPA  
 Copy 2 - Applicant copy

\*Product ingredient source information may be entitled to confidential treatment\*